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APPLICANTS

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**** CONTINUING DATA ******* *DW & name*

**** FOREIGN APPLICATIONS ******* *DW & name*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY IN	SHEETS DRAWING 6	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 2
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Verified and Acknowledged *Darling* *Howe* *DW*
 Examiner's Signature Initials

ADDRESS

Anthony Wayne Building
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TITLE

Remote supervision system and method

FILING FEE RECEIVED 454	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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